

SM-2781
5/94

Copies

White — Transferring SFA (FROM)
Copy — Recipient SFA (TO)
— STATE AGENCY

Michigan Department of Education
Office of School Support Services
Food Distribution Program
P O Box 30008
Lansing, Michigan 48909
Telephone (517) 373-8642

EXHIBIT #1

AUTHORIZATION DATE:

AUTHORIZED BY:

USDA COMMODITIES TRANSFER FORM

FROM

Agreement Number _____

School Food Authority _____

Address _____

Actual Site(s) _____

Contact Person _____ Title _____ Phone (_____) _____

Excess Commodities Transferred by _____

TO

Agreement Number _____

School Food Authority _____

Address _____

Actual Site(s) _____

Contact Person _____ Title _____ Phone (_____) _____

Commodity	Pack Size	Quantity

TRANSFER DATE

TRANSFERRING AGENT (Signature)

RECEIVING AGENT (Signature)